

# **LESSONS LEARNED: Best Practices for Criminal Justice Partnership Programs**

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# Introduction

The Office of Research and Planning conducts process evaluations for Criminal Justice Partnership Program Advisory Boards that request this type of assistance. In general, a process evaluation studies the initial program design and whether the program is operating as intended. There are four basic questions to answer in a process evaluation: 1) the extent to which the program is reaching the appropriate target population; 2) whether the program's intervention(s) delivery system is consistent with program design specifications; 3) what resources are being or have been expended for program operation; and 4) how the program can be improved.

A process evaluation is the first step in evaluation. After a program is stabilized and a process evaluation is conducted, an outcome evaluation would be a logical next step. An outcome evaluation focuses on the intermediate outcomes for offenders while they are in the program (e.g. successful completion rate, reduction in positive drug tests). An impact evaluation examines the long-term impact on offenders, usually 24-36 months after the intervention (e.g. recidivism, employment).

Evaluations are undertaken for several reasons. For instance, an evaluation can assess the effectiveness of new programs, judge the worth of ongoing programs, improve the management and administration of a program, and/or satisfy accountability requirements of the program's stakeholders.

After completing four process evaluations, the Research and Planning staff recognized that these programs had common strengths and challenges. These common areas can be categorized into ten major issues to be considered during future programmatic reviews. Partnership programs and other community-based programs can use this document for "best practices" guidance during discussion and examination by the Advisory Board, program staff, and other stakeholders.

## Part I. Basis for the Process Evaluations

### Effective Correctional Interventions

To conduct the process evaluations, the Research and Planning evaluation staff reviewed research on effective criminal justice and correctional interventions that reduce recidivism, then used this research to assess the linkages between program activities and expected outcomes. The research (Andrews, 1994; Andrews & Bonta, 1994; and Gendreau, 1994) concludes that:

- Official punishment without the introduction of correctional treatment services does not work.
- Providing correctional treatment services that are inconsistent with the principles of risk, need and responsivity does not work.

- The delivery of clinically and psychologically appropriate correctional treatment service, under a variety of setting conditions that may be established by a criminal sanction does work.
- The delivery of appropriate correctional treatment service is dependent upon assessments that are sensitive to risk, need and responsivity.

The researchers identified a variety of risk factors that predict the likelihood of continuing to commit crimes; some are static, such as prior criminal record and age at first arrest, and some are dynamic, such as antisocial attitudes and substance abuse. The research indicates that addressing the offender's crime producing (criminogenic) behavior can lead to a reduction in recidivism. The intervention must be responsive to the offender's behavior, cognitive behavioral and social learning style and the service provider must be able to be an effective role model (Andrews, 1989; Andrews & Bonta, 1994). Examples of promising targets for change include the following:

- Changing antisocial attitudes
- Changing/managing antisocial feelings
- Reducing antisocial peer associations
- Promoting familial affection/communication
- Promoting identification/association with anti-criminal role models
- Increasing self-control, self-management, and problem-solving skills,
- Replacing the skills of lying, stealing, and aggression with more pro-social alternatives
- Reducing chemical dependencies and substance abuse
- Shifting the density of the personal, interpersonal and other rewards and costs for criminal and non-criminal activities in familial, academic, vocational, recreational, and other behavioral settings, so that the non-criminal alternatives are favored
- Insuring that the offender is able to recognize risky situations, and has a concrete and well-rehearsed plan for dealing with those situations
- Confronting the personal and circumstantial barriers to service.

### Effective Substance Abuse Treatment Services

Since most CJP programs provide access to substance abuse treatment services to offenders, evaluation staff researched effective substance abuse treatment. According to a National Institutes of Health publication (Principles of Drug Abuse Treatment, 1999), research demonstrates that treatment for substance abusing offenders can have a significant beneficial effect upon future drug use, criminal behavior, and social functioning. The case for integrating substance abuse treatment with the criminal justice system is compelling. The majority of offenders involved with the criminal justice system are under community supervision. For those with known drug abuse problems, treatment may be recommended or mandated as a condition of probation. Research demonstrates that individuals who enter treatment under legal pressure have outcomes as favorable as those who enter treatment voluntarily do.

### *Approaches to Treatment*

Decades of research and clinical practice have led to a variety of approaches to substance abuse treatment. Addiction therapy can include behavioral therapy (such as counseling, cognitive therapy or psychotherapy), medications, or a combination of both. Treatment can occur in a variety of settings, in many different forms, and for different lengths of time. Because addiction is typically a chronic disorder characterized by relapses, a short-term or one-time treatment often is not sufficient. For many, treatment is a long-term process that involves multiple interventions and attempts at abstinence. The National Institute on Drug Abuse (NIDA, 1999) identifies numerous efficacious, scientifically based approaches to drug treatment. These approaches include the following:

- Relapse prevention – a cognitive-behavioral therapy to enhance self-control
- Supportive-expressive psychotherapy – a time-limited, focused psychotherapy
- Individual drug counseling – focuses directly on reducing or stopping the addict's illicit drug use and addresses areas of impaired functioning
- Motivational enhancement therapy – a client-centered counseling approach for initiating behavior change by helping individuals to resolve ambivalence about engagement in treatment and stopping drug use
- Behavioral therapy for adolescents – focuses on changing behavior through clear demonstration of the desired behavior and consistent reward of incremental steps toward achieving it
- Multidimensional family therapy for adolescents – out-patient family-based drug abuse treatment for teenagers
- Day treatment with abstinence contingencies and vouchers – includes individual and group counseling, multiple psycho-educational groups, and patient-governed community meetings during which patients review contract goals and provide support and encouragement to each other.

In addition to stopping substance abuse, the goal of treatment is to return the individual to productive functioning in the family, workplace, and community. Measures of effectiveness typically include levels of criminal behavior, family functioning, employability, and medical condition. Overall, substance abuse treatment is as successful as treatment of other chronic diseases. According to several studies, drug treatment reduces drug use by 40 to 60 percent and significantly decreases criminal activity during and after treatment. The outcome of individual treatment depends on the extent and nature of the individual's presenting problems, the appropriateness of the treatment components and related services used to address those problems, and the degree of active engagement of the individual in the treatment process.

### *Principles of Effective Treatment*

The National Institute on Drug Abuse (1999) established the following principles of effective treatment that should be the basis of drug treatment efforts:

1. No single treatment is appropriate for all individuals.
2. Treatment needs to be readily available.
3. Effective treatment attends to multiple needs of the individual, not just his or her drug use.
4. An individual's treatment and service(s) plan must be assessed continually and modified as necessary to ensure that the plan meets the person's changing needs.
5. Remaining in treatment for an adequate period of time is critical for treatment effectiveness.
6. Counseling (individual and/or group) and other behavioral therapies are critical components of effective treatment of addiction.
7. Medications are an important element of treatment for many patients, especially when combined with counseling and other behavioral therapies.
8. Addicted or drug-abusing individuals with coexisting mental disorders should have both disorders treated in an integrated way.
9. Medical detoxification is only the first stage of addiction treatment and by itself does little to change long-term drug use.
10. Treatment does not need to be voluntary to be effective.
11. Possible drug use during treatment must be monitored continuously.
12. Treatment programs should provide assessment for HIV/AIDS, Tuberculosis, Hepatitis B and C, and other infectious diseases, and counseling to help patients modify or change behaviors that place themselves or others at risk of infection.
13. Recovery from drug addiction can be a long-term process and frequently requires multiple episodes of treatment.

Research has demonstrated that the criminal justice system can play an integral role in substance abuse treatment (Taxman, 1998). The most effective treatment models integrate criminal justice and drug treatment systems and services. Treatment and criminal justice personnel work together on plans and implementation of screening, targeting, testing, monitoring, supervision, as well as the systematic use of sanctions and rewards for drug abusers in the criminal justice system. Effective correction-based treatment for substance abusing offenders reduces the risk of both recidivism to drug-related criminal behavior and relapse to drug use.

### Cognitive Behavior Interventions

The Department of Correction has adopted Cognitive Behavioral Interventions (CBI) as its primary offender rehabilitation tool. Many CJP programs provide CBI to offenders. Therefore, the evaluation staff conducted a review of research on Cognitive Behavioral Interventions. In 1987, Paul Gendreau and Robert Ross published an article entitled *Revivification of Rehabilitation: Evidence from the 1980's* that analyzed and discussed the characteristics of effective programs that reduce recidivism. According to this research, one common characteristic exists among the highly successfully programs – a technique, component, or approach that has an impact on the offender's cognition or

thinking. Since the 1990's offender programs that incorporate a cognitive behavioral approach are fast becoming the core component of effective rehabilitation programs.

### *Theory*

Cognitive behavioral theory, also known as social cognitive theory, views offenders' maladaptive behaviors as learned. These antisocial thoughts and actions become the central means by which they cope with life. Strong internal reinforcers such as feelings of excitement, pleasure and power offering immediate gratification maintain the behaviors. Cognitive behavioral programs emphasize self-management and choice and offer concrete and relevant skills necessary for change.

### *Approach*

Cognitive behavioral interventions (CBI) are based on the principle that thinking (an internal behavior) controls overt actions (external behavior). Therefore, through CBI programs (or curricula), offenders learn new skills and new ways of thinking that can lead to changes in their behavior and actions, and ultimately affect their criminal conduct. CBI programs use a combination of approaches to increase an offender's awareness of self and others. This awareness is coupled with the teaching of social skills to assist the offender with interpersonal problems. In other words, these specific types of intervention programs assist an offender in "restructuring" the thought process and teach "cognitive skills" to assist in basic decision-making and problem-solving. In general, restructuring requires therapeutic sessions with a trained psychologist or other mental health professional while correctional staff supporting this approach with offenders can facilitate skill-building classes.

There are a number of theories developed by researchers including Beck (1976), Ellis (1973), Yochelson and Samenow (1976) describing cognitive structures or thinking frameworks that lead to troubled behavior or criminal actions. These theories suggest that how an individual thinks about an external event, not the event itself, triggers feelings that can lead to criminal acts. The premise of a cognitive restructuring program is that offenders hold antisocial beliefs, attitudes and mental habits that lead them to criminal offenses. The goal of cognitive restructuring is to teach offenders how to change their antisocial beliefs to pro-social ones with the change process focusing on the content of their thinking. Cognitive restructuring guides offenders through a process of consciously examining their thoughts, and then making connections between their thoughts, related emotions and the crimes they commit.

Other researchers such as Ross and Fabiano (1985) identified social skills that offenders need to learn to become more pro-social people. Cognitive skills teach offenders how to modify their cognitive processes to control themselves and interact positively with others. The goal of cognitive skills is to teach offenders to manage their own behavior by engaging in processes that develop self-control, making them responsible for and in charge of their actions no matter how stressful the situation. These specific skills include problem solving, social skills training (learned behaviors that enable one to

interact with others in ways that elicit positive responses), anger management, and empathy training.

## Part II. Ten Lessons Learned from Process Evaluations

The following are recommendations for “best practices” for Criminal Justice Partnership programs based on the lessons learned by Research and Planning evaluation staff during the process evaluations. Programs can benchmark their progress by assessing their program’s performance in the general areas identified below.

### Advisory Board Development

- **Clear Definition of Role & Responsibilities:** An active, informed Advisory Board is key to program success. The Advisory Board has the final authority to implement the appropriate services to meet the objectives of the local CJP program. Structurally, the Advisory Board should include enough active members to delegate work assignments by subcommittees that meet between regular Board meetings. In other words, the Advisory Board subcommittees should be delegated the responsibility of overseeing and monitoring major functions of the local CJP program. Additionally, the Advisory Board members should reflect the necessary partnerships in the community that the program needs to be successful and thus provide effective services for offenders. The Board should be an advocate for the services needed by each offender served. This is the very reason that the Advisory Board should mirror the interests of the community, the criminal justice system, the business sector, and the programs and services frequently needed by offenders. A CJP program cannot be successful without the Board using its collective power to bring resources to the program. However, Board members should be aware of potential conflicts of interest when negotiating contractual agreements with service providers, particularly when those providers serve on the Board.
- **Program Monitoring and Maintenance:** The State and Local Criminal Justice Partnership Act requires that Advisory Boards meet at least quarterly. These meetings should be coordinated by the Advisory Board Chair and the Program Director, and should include reviewing periodic program data generated from the IMS by staff and a discussion of the data in terms of program performance. For example, a quarterly board meeting should include a review of monitoring data, budget expenditures, and subcommittee reports. One important topic for discussion is the program’s completion rate, the underlying trends revealed by the rate, and the steps for improvement. The Program Director should staff these meetings and work with the Advisory Board Chair to develop an annual meeting schedule, meeting agendas, and formats for monitoring and subcommittee reports. The County administering the CJP program may be able to offer assistance in how to structure



an effective Advisory Board meeting, so that there is a sense of accomplishment at the end of each meeting.

- On-site Review of CJPP activities: Through subcommittee activities, the Advisory Board should have frequent, on-site contact with staff and observe service delivery on a regular basis. Reviewing on-site activities increases the level of accountability for staff to offenders and for the Advisory Board to the program.
- Strategic Planning: The Advisory Board must have a clear understanding of the program's vision and mission to ensure that the appropriate services are available to offenders. Therefore, every CJPP Advisory Board should complete a short-term strategic planning process that yields a vision statement, mission statement, goals/objectives, strategies and tactics. The plan should also identify dates or time frames and the responsible person or group to perform the activities necessary to achieve the strategic goals. For example, the Board might set as an objective "to increase referrals from the courts." Board strategies might include sending a delegation to meet with court officials to discuss the program, developing a video for court officials so they are familiar with the services available at the program, or holding an informal gathering with court officials to show appreciation for their support of the program. The Advisory Board and program staff should utilize the strategic plan as a roadmap to ensure that the program evolves and develops along an ideological framework that responds to the needs of the offenders and the local community.
- Monitor Implementation of the Plan: Once a strategic plan is in place, the Advisory Board should develop and implement a process to monitor implementation of the plan. This process should include a review, on a routine basis, of the goals/objectives and strategies of the strategic plan, program data, staff reports and board reports on observation of on-site program activities. By making these types of activities a part of the culture of the Advisory Board, the Board can ensure that CJP programs is an effective component of a local community corrections strategy.

#### Staff Training & Development

- Effective Interventions: Every CJP program staff person should receive specific training to work with offenders. As corrections work is scrutinized more closely to determine its effectiveness, the need for a highly trained, highly skilled staff grows more apparent. Intensive training such as the Principles of Effective Interventions, organized by the National Institute of Corrections (1999), describes what works with offenders. Research and Planning staff and other Division of Community Corrections staff are available to present this training to CJPP staff. This workshop concentrates on the importance of risk, need, and responsivity in determining how a program structures activities for offenders.

- **Assessments:** The Principles of Effective Interventions workshop describes the use of standardized and valid assessment instruments to aid staff in identifying the risk and need levels of offenders. These issues are relevant to placing offenders in the appropriate levels of care.
- **Case Planning and Case Management:** Case planning, case management, and case staffings are extremely beneficial for monitoring an offender's progress and managing the dynamic yet complex set of needs. The staff needs to learn how to write case plans, including identifying steps to indicate individual offender progress.
- **Motivational Interviewing and Offender Engagement:** Motivational interviewing and offender engagement are key techniques and tools for staff to use to increase offender involvement with CJP programs and services. Since offenders exhibit anti-social behavior, they will not consistently attend and participate in programs and services that are seemingly beneficial. Increasing compliance among offenders is an extremely difficult task that requires diligence and consistent delivery of reward and consequences for non-compliance. Offenders need a clear view of the expectations (compliance) and resulting consequences (rewards and sanctions) based on their progress.
- **Specific Skill Development for Service/Program Delivery (e.g., CBI, substance abuse treatment):** Each staff member who provides case management services should also be trained or develop expertise to provide a core skill development activity offered by the CJP program such as CBI or substance abuse treatment. These skill development activities should address criminogenic needs and thus have impact on future criminal behavior. Other ancillary services such as employment readiness training and transitional housing placement are also important skill areas for staff training and expertise.

### Program Design and Implementation

- **Staff Involvement:** In order to design and implement a program successfully, there has to be a logical link between its purpose, its activities, and its outcomes. One tool for assessing these relationships in a program is the Logic Model. The Logic Model is commonly used as a framework for conducting process evaluations. To use the Logic Model, staff and/or the Board need to set aside time, at least one-half of a day, to talk about the following aspects of the program and the relationships between them: goal, target population, program resources, program context, activities/services, and intermediate and long-term outcomes. In Appendix 2 there is a list of questions that CJPP staff and/or board members can use to discuss the Logic model for their program, and an example of a completed Logic Model.
- **Program Logic Model:** CJPP staff should have the "big picture" about the program's purpose. They should understand the logic model of the program. This means they

should be able to articulate the program's planned goals and objectives, its priority target population, the resources it has, the environment it works in, sanction and/or program activities to address program goals and objectives, and intended measurable outcomes. It is easy for staff to get lost in day-to-day activities and lose sight of how their work relates to the larger purpose of the program. Staff should plan an annual meeting to review the program's logic model and its performance measures.

### Research/Science-Based Program Foundation

- Core Services: Programs should provide services that research/science (for example, Andrews, 1994; Andrews & Bonta, 1994; and Gendreau, 1994) indicates are effective correctional interventions that can reduce recidivism. These programs should represent the core programs and services that offenders are engaged in while in the program. The core programs and services should exhibit the characteristics of effective correctional interventions such as:
  - ✓ Intensive services, behavioral in nature, focused on higher risk offenders
  - ✓ Behaviorally oriented treatments and strategies enforced in a firm but fair manner by qualified staff
  - ✓ Address criminogenic needs which means targeting crime producing behavior
  - ✓ Responsivity which requires case managers to match offenders, staff, and programs based on learning and teaching styles
  - ✓ Disrupt criminal networks and limit anti-social (criminal) associations while increasing pro-social associations (mentoring)
  - ✓ Relapse prevention strategies must be included in case planning, case staffing, and case management activities
  - ✓ High levels of brokerage to ensure that case plan objectives are achievable
- Effective Correctional Interventions: Research indicates that CBI and effective substance abuse treatment when matched to the individual's level of care are effective correctional interventions. In addition, services that improve educational achievement and employability can improve the offender's likelihood of success in the community. Services such as self-esteem building or non-directive client-centered counseling are not as effective.

### Core Program Activities

- Clinical Assessments to Identify Risk, Need, & Responsivity: Every offender assigned to a CJP program should receive a clinical assessment that determines the level of risk for re-offending, criminogenic needs and risks, and his/her learning style. Through this clinical assessment process, staff will be able to determine if the offender will benefit from the program. Furthermore, the program staff will have data and information to be used in case planning activities. A widely recognized correctional assessment instrument is the Level of Service Inventory Revised

(Andrews & Bonta, 1995). The Offender Trait Inventory (OTI, Research & Planning, 1995) administered by the probation officer is an indicator of the offender's risk of revocation from probation. The Common Assessment developed by Treatment Alternatives to Street Crime (TASC, 1999) measures the level of care for substance abuse treatment and matches the offender to a treatment intervention.

- Individual Case Plan Development: Once the assessment and intake are completed, an individualized case plan should be developed. The case plan should identify achievable goals and objectives for the individual offender. Additionally, the case plan should be specific so that all involved (the offender, program staff, service providers, and probation) can be held accountable through individual and collective goals, objectives, and responsibilities. The case plan should outline an extremely detailed path for the offender, the program staff, the service providers, and probation to follow. It should allow for and anticipate modifications as necessary because it must be a dynamic process.
- Ongoing Case Management and Staffing to Ensure Relapse Prevention, Compliance: Developing the case plan will lead to ongoing case staffing and case management activities. Because case planning is a dynamic process, relapse prevention and compliance have to be addressed immediately and repeatedly. Thus case staffing and case management activities have to be well documented by the team and should be discussed at frequent intervals with the entire team, including the offender. The Advisory Board and program staff must recognize that offenders in the CJP programs are often asked to make complete lifestyle changes in order to comply with program rules and probation compliance. Change is a difficult process for any person, and major lifestyle changes in particular, therefore CJP programs must equip offenders with the necessary tools to make lasting change in their lives.

#### Program & Service Structure

- Multi-phase Framework: Each CJP program regardless of duration should be based on a framework of phases or stages for the offender to complete prior to discharge from the program. The basic stages should include an orientation/intake process, assessments, case planning, program/service participation, ongoing case management, and discharge. The length of each phase will vary from program to program but there should be a clear distinction between each phase and specific documentation procedures for the case file and CJPP IMS. The Advisory Board and program staff should establish benchmarks for each phase to ensure that offenders are progressing based on achievement of goals and not time spent in that phase. In other words, each phase should not have predefined beginning and end dates but rather should examine individual progress to determine advancement to the next phase.

- **Structure and Accountability:** Local CJP programs are community-based correctional interventions that emphasize structure and accountability in a non-residential setting. It is imperative that each offender has an individual schedule that specifies his/her obligations for attendance at services offered at or coordinated by the CJP Program. This schedule should be monitored closely for compliance. It is not acceptable for offenders to miss appointments with no consequence. Program staff, supervising probation officers, and service providers should reinforce the behavioral expectations established during case planning and outlined in the schedule including program participation and probation compliance. In addition, every CJP program needs a positive reinforcement system of rewards to include items such as personal attention, verbal praise, food, outings, event tickets, and curfew changes. Some rewards can be costly but others are practically free.

### Roles and Responsibilities of Probation

- **Compliance and Graduated Sanctions for Non-Compliance:** Probation officers should ensure offender compliance with supervision requirements and program regulations. In conjunction with CJP program staff, probation officers should implement graduated sanctions when non-compliance occurs. These sanctions should increase in severity by restricting freedom. Furthermore, sanctions should be specific and linked directly to issues of non-compliance. It is important that there is a consequence for every violation of program rules, but probation revocation should be the last resort after all other alternatives are exhausted. Each CJP program, in conjunction with probation officers, should develop written guidelines for compliance and should define both rewards and sanctions for offender behavior. The CJP Program should conduct a meeting with probation to develop the compliance guidelines.
- **Active Participation in Case Planning, Case Management, and Case Staffings:** Supervising probation officers should play an active role in case planning, case management, and case staffing activities as offenders progress through the program. Active probation involvement in these activities reinforces their importance and will likely increase an offender's compliance. Additionally, supervising officers should be included in specific skill development activities such as CBI to reinforce their importance as well as qualitatively enhance their interaction with the offenders. By participating in these activities, supervising officers will gain a greater understanding and knowledge of the offender's day-to-day circumstances and challenges, and how best to assist the offender in making the necessary changes to become a productive citizen.
- **Referrals:** Local probation plays a key role in the development and sustainability of a program. Local probation along with other members of the criminal justice system must act as the leading advocates for the program. In addition, the Advisory Board and program staff should look for ways to highlight the benefits of the program and

create opportunities to engage the larger community and garner their support. Every local CJP program should organize an event such as an open house to ensure that the community is informed about the program and the stakeholders solidly support its growth and development.

- **On-site Supervision:** Probation officers assigned to CJP programs can enforce compliance immediately. On-site supervision will increase the supervising officer's ability to actively participate in case planning, case management, and case staffing. In addition, the supervising officer will be able to participate in the skill development activities and emphasize the importance of program participation to the offender. Finally, on-site supervision will increase the opportunity for interagency collaboration.

### Role and Responsibilities of Service Providers

- **Curriculum-based Programs and Services:** Programs and services offered at a local CJP program should be curriculum-based and conducted by trained and/or certified service providers. These curricula should be appropriate for the intended audience, recognizing the special needs of female and youthful offenders in a correctional setting. In addition, the service providers should have experience in dealing with and engaging offenders in correctional programming. Basic components of program participation should include maintaining a roster of assigned participants, tracking attendance and participation, and reporting issues of non-compliance for case staffing and case management purposes in a timely manner.
- **Active Role Regarding Compliance and Supervision:** Although programs and services may be provided on a contractual or voluntary basis, the service providers must have in-depth understanding of the CJP program, and accept their role regarding compliance and supervision. Service providers should receive training on the vision, mission, goals, objectives, and history of the CJP program prior to delivering services. Program staff should also clearly explain the expectation that service providers will reinforce the sanctioning aspect of the program by adhering to established policy and procedure. Finally, service providers should play an active role in case planning, case staffing, and case management. They should provide feedback and documentation of offender behavior as part of the decision-making process, especially if the staff recommendation is to terminate an offender from the program.

### Documentation - CJPP Information Management System (IMS) and Case Files

- **Procedures to Document Case Planning, Case Management, and Case Staffing Activities:** The purpose of the CJPP IMS is to document offender activities in local community corrections programs. The IMS is an independent database that is accessible through the Internet but incorporates information from the Department of

Correction's Offender Population Unified System (OPUS) automated database. Each local program must make a commitment of time and energy in order to populate the IMS with data regarding offender entries, exits, and activities while in the program. In particular, a program should clearly and comprehensively document case planning, case management, and case staffing activities for every offender assigned to the program. The IMS is the primary tool for providing information to the Department of Correction and the General Assembly regarding program activities.

- **Effective Use of IMS (including periodic review of reports):** Once proper data entry procedures are in place, the CJPP IMS can provide reports on individuals, programs and services. There are three types of reports currently available from the CJPP IMS: the Instance Status Report, the Program Summary Report, and the Monthly Program Narratives. Program staff and the Advisory Board should use these reports to monitor program objectives and outcomes. However, these reports are only useful when data entry is complete, accurate and timely.
- **Complete Offender Case Files:** Accurate and complete individual case files are critical to case planning, case management and progress monitoring. At a minimum, case files should include the completed screening and assessment instruments, the case plan, progress notes, court judgements, release(s) of information, and copies of correspondence with probation officers, other service providers, and the offender.

#### Self-Monitoring and Assessment

- **Monitoring Outcome Measures:** Local CJP programs staff, in conjunction with the Advisory Boards, needs to develop measurable objectives for program activities. Initial measures will constitute a baseline for comparison from year to year. Self-monitoring is an important, internal function that can keep the program focused and can help redesign itself as needed. For example, if increasing educational achievement is one of the program's goals, the program may coordinate a G.E.D class through the community college system. A measurable outcome might be that 50% of offenders improve on their G.E.D. preparation tests. However, after completing an external evaluation, it appears that only 25% of offenders can qualify to take the G.E.D. test after participating in the classes, the CJP program may need to ask the community college to provide Adult Basic Education classes to offenders in addition to G.E.D. classes. It is easy for staff and Board members to focus on day-to-day activities and not on the outcomes of those activities. Continual program improvement is necessary and self-monitoring is an important step in this process.
- **Self-Assessment:** The CJP Act places the responsibility for evaluation of local programs with local Advisory Boards. Most local Advisory Boards have neither the funds to contract for process, outcome or impact evaluations nor the expertise to conduct evaluations themselves. As part of the process evaluations conducted by the Office of Research and Planning, the evaluation staff used a checklist to

measure the implementation of effective correctional treatment (Gendreau, Goggin, & Smith, 1999). The checklist identifies the qualities that are associated with successful programs and measures the extent to which these program characteristics are present in correctional programs. It is based on extensive review of research on effective treatment services for offenders. The researchers who developed the checklist stress the importance of paying careful attention to how programs are implemented. This checklist contains thirty elements identified as necessary in implementing effective treatment programs for offenders. Four general categories cover the content areas - Organizational Factors, Program Factors, Program Activities, and Staffing Factors. On the checklist, each item is scored as fully present, partially present, or not present in the design and implementation of the program. Program staff and Advisory Board members could complete this self-assessment, average the responses, and use it as a discussion tool for program improvement (see Appendix 2).

### Part III. Conclusion

The North Carolina General Assembly adopted the Criminal Justice Partnership Act in 1994 along with the Structured Sentencing Act. The legislative goals of the Partnership Act include the following:

- To reduce recidivism
- To reduce probation violations
- To reduce drug and alcohol dependencies, and
- To reduce the cost of incarceration to the State and to counties.

In order to meet these goals, the Department of Correction's Division of Community Corrections, local CJP Programs and Advisory Boards, and the N. C. Association of County Commissioners need to jointly embark on a course to address the effectiveness of these programs. The Lessons Learned presented in this document is a beginning point – a place to start to share information on best practices with CJP programs. In conjunction with intensive technical assistance, staff training, board development and support, and the adoption of standards, Criminal Justice Partnership Programs will be better equipped to achieve the goals in the CJPP Act.



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## Appendix 1

### LESSONS LEARNED SUMMARY

#### **I. Advisory Board Development**

- ✓ Board's monitoring role and responsibilities are clearly defined and understood
- ✓ Board's strategic planning role and responsibilities are clearly defined and understood
- ✓ Board is active and meets at least quarterly
- ✓ Attendance at Board meeting is 75% or above
- ✓ Board has subcommittees that meet regularly
- ✓ Board members go on-site periodically to observe
- ✓ Board composition represents community partnerships
- ✓ Board members act as advocates
- ✓ No Board members are service contractors

#### **II. Staff Training and Development**

- ✓ Staff received training/orientation on *Effective Interventions with Offenders*
- ✓ Staff received training on Assessment Tools and using them with offenders
- ✓ Staff receive training on offender case planning and case management
- ✓ Staff received training on motivational interviewing and offender engagement
- ✓ Staff received training in Cognitive Behavioral Interventions (CBI)
- ✓ Staff received training in delivering substance abuse services
- ✓ Staff received training pertinent to delivery of other services

#### **III. Program Design and Implementation**

- ✓ Program staff and Board understand the Program Logic Model tool
- ✓ Program staff and Board use the Logic Model tool for self-evaluation
- ✓ Program staff and Board meets annually to review Program Logic Model and revise as needed

#### **IV. Research/Science-Based Program Foundation**

- ✓ Program provides core services that research indicates are effective interventions that can reduce recidivism
- ✓ Program's core services have the characteristics of effective correctional interventions

#### **V. Core Program Activities**

- ✓ Program uses valid assessment instruments to identify each offender's risk, need and responsivity

- ✓ Program develops individual case plans which specify intermediate and long-term achievable goals
- ✓ Program conducts on-going team case staffings and case management activities

**VI. Program and Service Structure**

- ✓ Program has phases or stages for the offender to complete prior to discharge (e.g. intake, assessment, case planning, program/service participation, on-going case management, and discharge)
- ✓ Program emphasizes structure and offender accountability through individual schedules

**VII. Roles and Responsibilities of Probation**

- ✓ Program has developed, in conjunction with probation officers, written compliance and non-compliance guidelines, including with rewards and sanctions
- ✓ Probation officers respond in a timely and appropriate manner to compliant and non-compliant offender behavior
- ✓ Probation officers actively participate in case planning, case management and case staffings
- ✓ Probation officers refer appropriate offenders regularly
- ✓ Probation officers provide on-site supervision of offenders

**VIII. Roles and Responsibilities of Service Providers**

- ✓ Service contracts require curriculum-based services
- ✓ Service providers have training and expertise in services they provide
- ✓ Service providers play an active role in monitoring and responding to offender compliance and non-compliance

**IX. Documentation in CJPP Information Management Systems (IMS) and Case Files**

- ✓ Program has procedures in place to ensure that staff document case planning, case management, and case staffing activities in IMS and case files
- ✓ Program effectively uses IMS data and reports to monitor program activities and progress
- ✓ Offender case files are accurate, up-to date and complete

**X. Self-Monitoring and Assessment**

- ✓ Program has a self-monitoring plan to assess progress towards measurable objectives
- ✓ Program has an annual self-evaluation plan in place

## Appendix 2

### **DISCUSSION GUIDE FOR THE PROGRAM LOGIC MODEL**

#### I. *Program Goals*

- A. What is your program trying to accomplish?
  - A.1 What impact is this program trying to make on:
    - offenders who enter treatment?
    - their families?
    - the community?

#### II. *Priority Target Population*

- A. Who is your program attempting to serve? (What are the characteristics of your target population?)
  - A.1 Describe the population you are actually serving in terms of:
    - demographics
    - problems offenders enter with
    - family characteristics
    - motivation for treatment
    - expectations about treatment
  - A.2 Is your program reaching/recruiting the individuals targeted?
    - What recruiting problems have you faced?
    - What could be done/is being done to overcome these problems?

#### III. *Inputs/Resources*

- A. What inputs or resources do you have to operate the program?
  - A.1 What are your sources and amount of funding from the following?
    - State funds
    - County funds
    - Federal grant funds
    - Foundation funds
    - Other funds
  - A.2 What are your staff resources?
    - How many staff do you have?
    - Is your staffing pattern adequate for the services you provide?
  - A.3 What facility resources do you have?
    - What facilities do you have?
    - Are the facilities adequate for program services and staff needs?

#### IV. *External Context/Environment of Program*

- A. What characteristics of the program environment are necessary to support program goals?
  - what kind of climate is required for offenders to be successful?
    - In the facility (administrative rules, policies, processes, staffing?)

- In the offender's outside community after discharge?
- B. How much is program success dependent on coordination with other entities (agencies, programs, organizations) inside and outside of the facility?
  - what kinds of coordination are necessary? with whom?
- C. How do services provided by other agencies need to work to support the program?
- D. What problems exist with coordination of services with other agencies?
  - How can these problems be addressed successfully?
- E. What is your relationship with county government?
  - E.1 How often do you have contact with county officials?
  - E.2 What type of support does county government offer you?
- F. What is your relationship with District Court judges?
  - F.1 How often do you have contact with District Court judges?
  - F.2 What types of support do District Court judges offer you?
- G. What is your relationship with Superior Court judges?
  - G.1 How often do you have contact with Superior Court judges?
  - G.2 What type of support do Superior Court judges offer you?
- H. What is your relationship with other court officials?
  - H.1 How often do you have contact with other court officials?
  - H.2 What type of support do other court officials offer you?
- I. What is your relationship with probation officers?
  - I.1 How often do you have contact with probation officers?
  - I.2 What type of support do probation officers offer you?
- J. What other agencies do you work with regularly?
  - J.1. How often do you have contact with them?
  - J.2. What type of support do they offer you?

V. *Sanction and Program Activities*

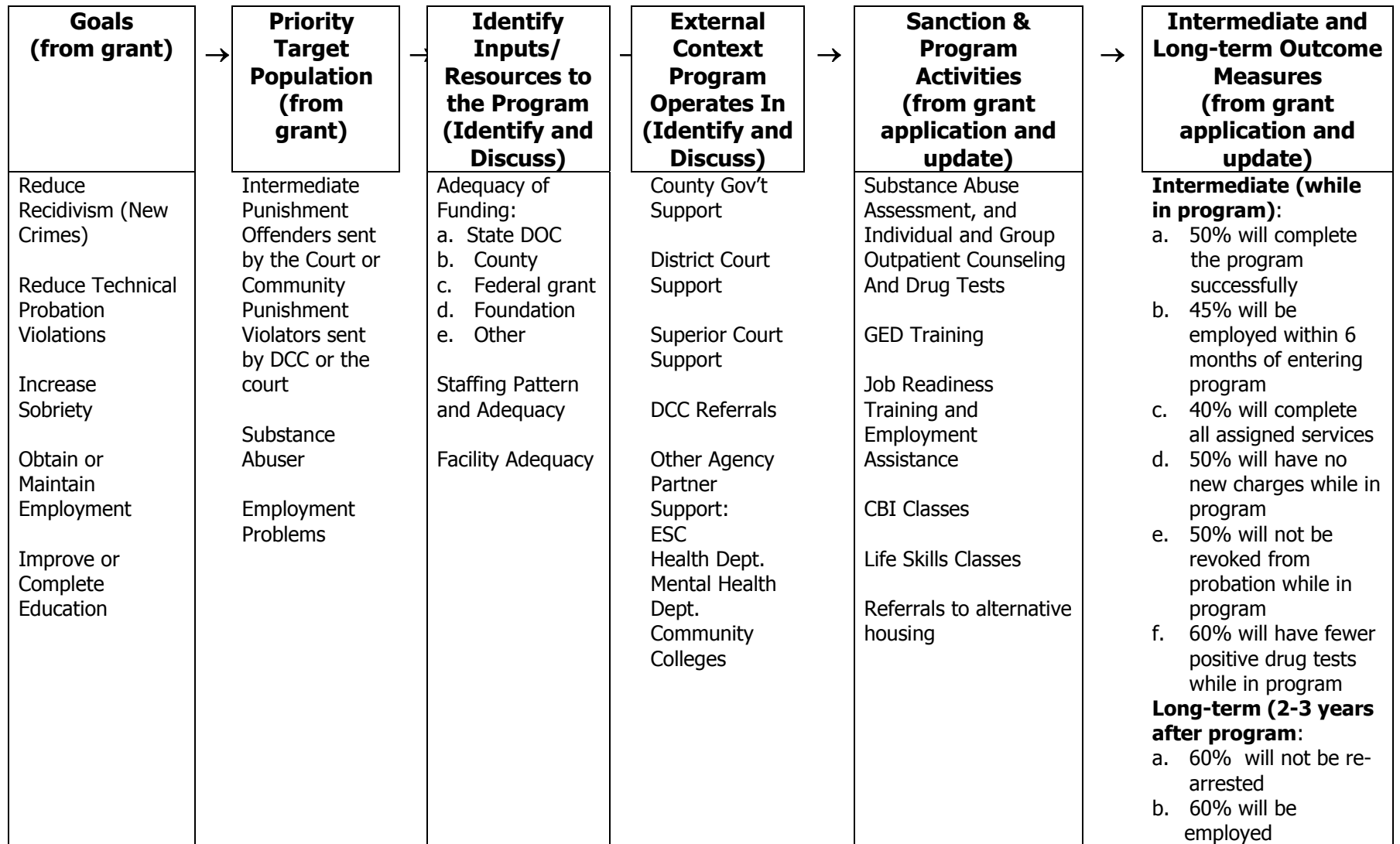
- A. What are the sanction aspects of your program?
  - A.1. What probation supervision level are offenders under?
  - A.2. What restrictions are offenders under while at the program?
  - A.3. Is there an individual schedule to structure the offender's day?
  - A.4. How many hours is the offender on-site?
  - A.5. How is the offender's structured schedule monitored?
  - A.6. Is there a system in place in monitor and reward or sanction non-compliance? Are procedures in place to notify the probation officer of non-compliance with the structured schedule or with program rules?
- B. What are the components of the treatment model you coordinate?
  - B.1 What components does your program provide?
  - B.2 What components are provided by other agencies?
  - B.3 What tasks/activities do you perform within the program in delivering each component?



- B.4 Which components are most important/essential? (Do some components have interactive properties?)
- B.5 How is your program designed to meet the needs of special populations? Are any of your treatment components tailored to meet the needs of:
- women?
  - pregnant women?
  - Offenders' children and families?
  - ethnic/cultural populations?
  - adolescents?
  - handicapped/disabled?
  - other special populations?
- B.6 How does each component contribute to accomplishing your goals/objectives?
- B.7 What problems do you face in carrying out the activities necessary to deliver the treatment components? (What can/should be done to overcome these problems?)
- B.8 What is expected of offenders in the program:
- during treatment?
  - after they leave treatment?
- B.9 What do offenders actually do during treatment? What activities do they participate in?
- B.10 How much treatment do your offenders get?
- amount (length of sessions, spacing of sessions)?
  - frequency (how often)?
  - duration (over what period of time)?
  - stages/phases of treatment
- B.11 Are offenders getting enough treatment to reach their treatment goals? To reach your program goals?
- what amount of treatment is minimally acceptable?
  - what changes, if any are necessary in the amount of treatment offenders are receiving?
- B.12 What changes do you expect offenders to go through during treatment?
- B.13 Can you identify stages of change for these offenders who go through treatment successfully?
- B.14 How rapidly can offenders be expected to proceed through these stages?
- B.15 How do you know that the treatment is working?
- B.16 List some indicators or signals that the treatment is working.
- B.17 What kinds of offenders can you be successful with (e.g., motivation, education)?
- is this your target population?

- VI. *What are the intended intermediate and long-term outcomes of the program?*
- A. What are the outcomes that you can produce while offenders are in the program?
- A.1 What are the measurable outcomes that your program can produce (stated in terms of a percentage) for the following examples:
- Program completion rate
  - Service completion rate
  - Employment rate
  - Educational improvement rate
  - Reduction in substance abuse rate
  - Criminal activity reduction rate
  - Probation violation reduction rate
- A.2 How do you monitor the intermediate outcomes of your program?
- What type of monitoring system do you have in place?
  - What information do you maintain in automated records?
  - What information do you maintain in case files?
  - What types of summary reports do you produce?
  - How often do you review summary reports and discuss them with your Board?
- B. What are the long-term outcomes that you can produce after offenders exit your program for 2-3 years?
- B.1 What are the long-term measurable outcomes that your program can produce (stated in terms of a percentage) for the following examples?
- Recidivism rate
  - Probation revocation rate
  - Employment rate
  - Reduction in substance abuse rate/
  - Educational improvement rate
- B.2 Do you have the expertise to do a long-term evaluation of your program?
- Do you have the in-house capacity to do academic research on long-term outcomes?
  - Do you have funds to hire an evaluator to do long-term evaluation?
  - Can you identify other entities who do long-term evaluation for free (e.g. Sentencing and Advisory Policy Commission, local colleges)?

## CRIMINAL X CCJPP PROGRAM LOGIC MODEL



## Appendix 3

### Elements of Correctional Treatment Programs for Offenders

Name of Program: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Paul Gendreau, Claire Goggin, and Paula Smith developed a checklist for implementing effective correctional treatment programs. To what extent are these elements present in the design and implementation of your program? On a scale of 1 to 3, indicate your opinion, with a 3 indicating the element is fully present, 1 indicating it is not present and 2 indicating it is partially present. Please briefly explain your response.

Ranking	Organizational Factors
	1. The agency has a history of adopting new initiatives.
	2. The agency puts new initiatives efficiently into place.
	3. The agency's bureaucratic structure is moderately decentralized and allows flexible responses to troublesome issues.
	4. Troublesome issues are addressed in a timely fashion.

	5. Troublesome issues are resolved in a non-confrontational manner.
	6. Few conflicts exist within the agency's staff and management.
	7. Staff turnover has been under 25% over the previous two years.
<b>Ranking</b>	<b>Organizational Factors</b>
	8. The agency has biannual instruction on offender assessment and treatment.
	9. The agency is connected to consultants or educational institutions, which can provide guidelines and training on various service delivery issues.
	<b>Program Factors</b>
	10. Program outcomes are documented empirically through information systems, surveys, exit interviews, focus groups, etc.
	11. Program services are based on scientific evidence that the services are effective with offenders.

	12. The program does not overstate possible gains, such as a reduction in recidivism, that the program might achieve.
	13. Stakeholders, such as board members, county staff, program management, and program staff, agree the program is timely, important, and congruent with existing community and institutional values and practices.
	14. Stakeholders agree the program meets the specific needs of its clients.
	<b>Program Factors</b>
	15. The program is cost-effective; able to obtain continued funding, and sustainable.
<b>Ranking</b>	<b>Program Factors</b>
	16. The agency was free of major conflicts or problems when programs were being initiated.

	17. Programs are designed to maintain current staffing levels, support professional autonomy, enhance professional credentials, and staff efficiency.
	18. Program development has been incremental, beginning with a pilot or transitional phase, expanding services slowly and focusing at first, on achieving intermediate goals.
	<b>Program Activities</b> <b>Change agents refers to individuals that lead, operate, or facilitate major program components.</b>
	19. Change agents have intimate knowledge of the agency and its staff.
	20. Change agents have the support of senior and line staff.
	21. Change agents are compatible with agency mandates and goals.
	22. Change agents have professional credibility.

	23. Change agents have a history of successful implementation efforts in the program area.
Ranking	<b>Program Activities</b>
	24. Change agents employ central routes of persuasion, motivational interviewing techniques, reciprocity, authority, reinforcement, modeling, systemic problem solving, and advocacy/brokerage.
	<b>Staffing Factors</b>
	25. Staff has frequent and immediate access to the change agent(s).
	26. Staff understands the program's theoretical roots.
	27. Staff has professional/technical skills regarding offender treatment.
	28. Staff feels and thinks they can effectively operate the program.
	29. Staff has sufficient resources, time, and feedback mechanisms.
	30. Staff participates directly in program development.